

**DECLARATION AND POWER OF
ATTORNEY FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Atty Docket: 1110-279
 Inventors: BRYSON et al.
 A copy of this Declaration is intended for the attached application submitted herewith (which is a CON of 10/162,199).

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing

COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ENCLOSED AXLE DIFFERENTIAL LOCK MECHANISM the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/298,906	06/19/2001

I or we hereby appoint the registered practitioner(s) associated with Customer No. 6449 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number 6449.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Thomas Steven				Family Name or Surname BRYSON		
Inventor's Signature <i>Thomas Steven Bryson</i>		Date 5/24/2002				
Residence: City Chambersburg	State PA	Country U.S.	Citizenship U.S.			
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City Chambersburg	State PA	Zip 17201	Country U.S.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Mark Allan				Family Name or Surname WINDERS		
Inventor's Signature <i>Mark Allan Winders</i>		Date 5/28/2002				
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Richard Duane				Family Name or Surname SCHNURR		
Inventor's Signature <i>Richard Duane Schnurr</i>		Date 5/24/2002				
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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname		
Inventor's Signature		Date				
Residence: City	State	Country	Citizenship			
Mailing Address						
Mailing Address						
City	State	Zip	Country			